

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000028288

Entity Name: DICENTRA, LLC

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2525 DAVIE ROAD  
BLDG 330  
DAVIE,, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

2525 DAVIE ROAD,  
BLDG 330  
DAVIE,, FL 33317

**New Mailing Address:**

FEI Number: 33-1220585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NOVELA & ASSOCIATES, P.A.  
1390 BRICKELL AVENUE  
SUITE 200  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: WOJEWNIK, ALICJA  
Address: 2525 DAVIE ROAD, BLDG 330  
City-St-Zip: DAVIE, FL 33317

Title: VP  
Name: WOJEWNIK, PETER  
Address: 2525 DAVIE ROAD, BLDG 330  
City-St-Zip: DAVIE, FL 33317

Title: VP  
Name: WOJEWNIK, KAROL DR.  
Address: 2525 DAVIE ROAD, BLDG 330  
City-St-Zip: DAVIE, FL 33317

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALICJA WOJEWNIK

PRES

03/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date